

# Program Memorandum Intermediaries

Department of Health and  
Human Services (DHHS)  
HEALTH CARE FINANCING  
ADMINISTRATION (HCFA)

Transmittal A-01-18

Date: FEBRUARY 1, 2001

## CHANGE REQUEST 1492

**SUBJECT: Effective Dates for all Medicare Secondary Payer (MSP) Sub-Modules Found in the MSP Pay (MSPPAY) Module**

This Program Memorandum (PM) clarifies the effective dates for each of the sub-modules found in MSPPAY. There are 5 sub-modules within MSPPAY with MSPPAYOL and MSPPAYPS as the two new sub-modules. The MSPPAY module initiates MSP payment using the four MSP calculations identified in 42 CFR 411.33. There are sub-modules in MSPPAY that calculate and apportion the MSP payment. The current version of MSPPAY is MSPPAY M06.00 (version 6).

All necessary claim information must be sent to MSPPAY by the standard system in order to initiate the MSP payment calculation. The MSPPAY module will direct the claim to the appropriate sub-module if the standard system sends the correct RECORD-ID to MSPPAY. The RECORD-IDs, including the detailed specs for MSPPAY, are found in the MSPPAY technical documentation provided to you with the module. The RECORD-IDs are also identified below. Section 3697 of the Medicare Intermediary Manual will be updated shortly to include the updated RECORD-IDs and specs for outpatient PPS and home health PPS. The modules, along with their effective dates, and RECORD ID for the bill type, are as follows:

- MSPPAYO - Payment calculation for all outpatient, inpatient and hospice claim types with service THRU-DATE **prior to** November 13, 1989 (original MSPPAY Module effective date). For these types of claims and services dates, the standard system must send RECORD-IDs HMIP (inpatient/skilled nursing facility (SNF)/RNM claim), HMOP (outpatient claim), HMHH (home health claim) and HMHC (hospice claim) to MSPPAY for MSP payment calculation under MSPPAYO. There is no change to this module.

- MSPPAYAI - Payment calculation for inpatient, SNF, and religious non-medical claim types with service THRU-DATE on or after November 13, 1989. The standard system must send RECORD ID of HMIP to MSPPAY to calculate payment under MSPPAYAI. There is no change to this module.

- MSPPAYOL – Beginning April 1, 2000, the standard system must send RECORD ID of HMOL (outpatient claim by line) to MSPPAY to calculate payment under MSPPAYOL for hospice, non-PPS outpatient and non-PPS home health claim types with service THRU-DATE on or after November 13, 1989. MSPPAYOL accepts line level MSP claim information from MSPPAY and apportions the primary payer's paid amount and obligated to accept as payment in full amount, if applicable.

- MSPPAYPS – Beginning August 1, 2000, the standard system must send RECORD ID of HMPS to MSPPAY to calculate payment under MSPPAYPS for outpatient prospective payment system (PPS) claim types with service FROM-DATES on or after August 1, 2000. Beginning October 1, 2000, the standard system must send RECORD ID of HMPS to MSPPAY to calculate payment under MSPPAYPS for home health PPS claim types with service FROM-DATE on or October 1, 2000. MSPPAYPS apportions MSP payment for outpatient and home health PPS claim types.

- MSPPAYAO - Payment calculation for outpatient, home health, including PPS and non-PPS claims and hospice claim types with service THRU-DATE on or after November 13, 1989. The standard system must send RECORD ID of HMOP (for pre-CELIP, pre-PPS outpatient bills), HMHH (pre-CELIP, pre-PPS home health bills) and HMHC (pre-CELIP hospice claims) to MSPPAY to calculate payment under MSPPAYAO. There is no change to this module.

**The *effective dates* for this PM are stated above.**

**The *implementation date* for this PM is April 1, 2001.**

**These instructions should be implemented within your current operating budget.**

**This PM may be discarded after April 1, 2002.**

**If you have any questions, contact Richard Mazur at (410) 786-1418.**